

burdened student needs when struggling with a top-heavy curriculum. The familiarity with the subject matter provided by a working forensic pathologist shows through the writing, displaying the healthy scepticism needed when discussing controversial matters such as suffocation, cot death and aspiration of vomit. The vast subject of toxicology has to be squeezed into a few pages, but again the best use is made of these, with tables of common drugs, their effects and toxic concentrations. Drugs of abuse get deserved prominence, not unnaturally from a pathologist who probably sees more on his central London 'patch' than anyone else in the country.

In summary, though this type of book has a number of competitors, albeit usually rather larger, it provides the most concentrated dose of legal medicine available, in a palatable form. With the sad decline in undergraduate teaching in the legal aspects of medicine in this country, the more that accessible and economical written sources become available, the better. The publisher's blurb suggests that it might also be of use to police and probation officers and this may well be true, though medical students will obviously remain the prime target.

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Logos – Manufactured Motherhood; The Ethics of the New Reproductive Techniques

William J Prior, 213 pages, Santa Clara California, US\$11.00, Santa Clara University, 1988

Logos (Vol 9 1988) derives from papers presented at a philosophical conference on Manufactured Motherhood held in the Philosophy Department at Santa Clara University in the Spring of 1988.

Not surprisingly, papers at the conference centred on the topic of surrogacy, since, at the time, the famous decision of Judge Harvey Sorkow in the Baby M surrogate motherhood case was prominent in the headlines.

Many ethical (and legal) issues

surrounding the practice of surrogacy are discussed and although a preponderance of the arguments are (by now) well-rehearsed, some contributors present the issues from a new (and sometimes controversial) perspective. In particular, Herbert T Krimmel (*Surrogate Mother Arrangements from the Perspective of the Child*, p 97) argues that surrogacy is harmful morally to the children thereby created since they may be regarded as mere 'commodities' rather than as of value in themselves. Whilst, no doubt, many would take issue with this view, it has the advantage of highlighting the interests of the children, which tend to become obscured in an over-concentration on the conflicting rights of the parties to the transaction.

As an example of this; June Carbone (*The Limits of Contract in Family Law: An Analysis of Surrogate Motherhood* p 147) considers the legality and effectiveness of the surrogacy contract. She argues that such contracts are consistent with the interests of the contracting adults and the welfare of the child and contends that it is important that the law takes a declared stance on whether such contracts are to be treated as enforceable or not, since uncertainty as to the validity of the contract is detrimental to all concerned. Whilst at first sight such an argument is persuasive and certainty in the law is to be applauded, on consideration, it is difficult to see how a rigid declaration that such contracts are enforceable can really benefit the child. Only if disputed contracts are dealt with on a 'case by case' basis can the individual child's welfare be given full consideration. A blanket decision on enforceability would not achieve this desired result.

In England the position is more straightforward: commercial surrogacy arrangements were outlawed by The Surrogacy Arrangements Act in 1985 and only private non-commercial arrangements may now exist. Even so, such contracts are unenforceable and void as contrary to the common law and The Children Act 1975. Thus, in all reported cases of such disputes the English courts have followed the wishes of the surrogate mother, whether this has been to retain the child or to comply with the arrangement (provided that the party concerned can demonstrate an ability to provide adequate care for the child).

The volume, then, is recommended for the new perspectives that it brings to issues which remain as controversial as ever. However, caution is urged, in that some of the concerns expressed about

current practices are inapplicable to our own situation.

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Abortion, Doctors and the Law: Some Aspects of the Legal Regulation of Abortion in England from 1803 to 1982

John Keown, 212 pages, Cambridge, £27.50, Cambridge University Press, 1988

Traditionally, abortion is regarded as an area where the law has been influenced heavily by considerations of ethics. Contemporary debates on the restriction of the time limit for abortion and the new RU486 abortion pill feature the same, rather tired, arguments concerning the sanctity of fetal life versus a woman's right to choose. Keown's copiously researched work invites us to look a little deeper at the evolution of law and policy on abortion, and specifically invites us to pay slightly more attention to the sociology of the medical profession than to ethics.

Keown analyses the development of the law on abortion from Lord Ellenborough's Act of 1803 up to and beyond the Abortion Act 1967, paying particular attention to the role of the medical profession in this evolution. The principal thesis of the work is conveniently summarised in the last chapter: throughout the history of abortion legislation the medical profession has exerted an important influence on the determination of when abortion is deemed 'criminal' and when 'therapeutic'. This has two aspects. Firstly, on a political level, the profession supported legislation from 1803 to 1861 (which helped establish its professional status) and in 1967 (which furthered its professional interests). Secondly, on a practical level, the practitioner exercises extensive autonomy in deciding whether a given abortion is therapeutic. On the first point, Keown makes some fascinating observations on how a legal prohibition of abortion, first unambiguously found in the Act of 1803, promoted the cohesion of the professional group of surgeon-apothecaries, the original

'general practitioners'. The fear of these 'regular' practitioners was that their claims to professionalism were being undermined by 'irregular competitors' such as midwives. This early account of intra-professional rivalry will be of great interest to those who view doctors' fraternal spirit as a significant barrier to an increase in their public accountability (1). In the second aspect to his thesis, Keown is indicating a tendency for social problems to be medicalised by placing decision-making authority in the hands of doctors rather than say the courts. For Keown, this amounts to the 'medicalisation of deviance'.

By way of criticism, the book insufficiently examines an explanation of medicalisation mentioned briefly on p 165: the State's desire to avoid criminalising those who sought and provided abortion. This 'side-stepping' policy is shown by Keown to have a long pedigree, stemming from the days when common law courts used procedural technicalities to avoid prosecution for abortion, and indeed is found in many contemporary areas in the medico-legal field, such as neonaticide and mercy killing. While not conducive to certainty, such a policy permits both legal condemnation of these practices and flexibility in appropriate circumstances. Secondly, I would have found interesting an examination of the relation between the decisions of the early courts (common law and ecclesiastical) and biblical injunctions. Like much discussion of abortion, the book assumes such a relation is straightforward (2). Lastly, it is regrettable that the book could not have examined the motives for significant post-1982 legislative proposals in an era where change to abortion law seems unavoidable. These however are trivial criticisms and cannot detract from a work which hopefully will act as a catalyst for similar socio-historical inquiries in medical law.

References

- (1) See Jacob J M. *Doctors and rules: a sociology of professional values*. London and New York: Routledge, 1988.
- (2) For a consideration of biblical authority see Dunstan R G and Seller M J, eds. *The status of the human embryo: perspectives from moral tradition*. Oxford: Oxford University Press, 1988.

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Ethics and Regulation of Clinical Research

(2nd edition), Robert J Levine,
452 pages, New Haven and London,
£12.95, Yale University Press, 1986

This 'survey of the ethical and legal duties of clinical researchers' is firmly embedded in the framework of American reports and regulations. Levine is a professor of medicine at Yale and his book bears the stamp of the practising clinician and the experienced investigator rather than the moral philosopher. He wants to provide workable solutions to practical problems. Philosophical questions about underlying ethical principles are not relentlessly pursued to the point of analytical or speculative exhaustion. Indeed, Levine accepts that most of the answers have been provided by the National Commission for the Protection of Human Subjects of Biomedical and Behavioural Research. Arguments about the justification of clinical research with human subjects are referred to rather than discussed (the book has an ample 724 references for the more enquiring and disputatious reader). In short, this is a kind of handbook showing how principles, regulations and guidelines are and should be applied in practice. The fact that the regulations are exclusively American should not deter British readers. The flimsiness of the regulatory framework in this country is sufficient to ensure that they will find it extremely useful. As with any reference work it should be judged not by the way the arguments are developed (these are few and far between) but by the extent of its coverage and the lucidity of its organisation. In both respects it is an excellent work. Levine has set himself a specific task and has carried it out admirably. Critical comments on the book are therefore likely to read either as quibbles or as recommendations for an expanded third edition. Mine fall into the latter category and arise only from a sense of disappointment that some issues or questions were not explored further. Those on the edge of scientific literacy would benefit from a fuller discussion of good and bad research design, and the relationship between the scientific and ethical evaluation of research. Anyone looking for guidance on one of the 'hot topics' in clinical research – when to end controlled trials – will also find this

book disappointing. Levine gives short shrift to the idea that the views of anyone other than the scientific community are relevant to such questions. They and they alone should decide what levels of probability should be attached to the determination of risk and efficacy. The rules of evidence are, in his view, determined solely by the requirements of good science.

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New Prospects for Medicine

Edited by Jonathan M Austyn, 131
pages, New York, £12.50, Oxford
University Press, 1987

If you are the sort of person who enjoys succinct well-written essays on topical medical matters, then you will undoubtedly enjoy this slim collection. Let me say at the outset, please do not be put off by the title or the cover.

The Wolfson College lectures have been a regular event at the University of Oxford since 1970. These essays record those delivered in 1987.

The work is introduced by an expert transplant immunologist. To a medical latecomer like myself it is astounding that it was only in the 1970s that it became evident that one might actually be able to isolate genes from any organism, let alone man. Further, it is equally hard to believe that as late as the 1950s, lymphocytes had no known purpose!

In one essay, which is my personal favourite, Sir Raymond Hoffenberg, President of the Royal College of Physicians discusses the problems and prospects for modern medicine. I do not suppose many people realise that a 50 per cent reduction in the four major high cost techniques – CT scans, renal dialysis, fetal monitoring and coronary artery bypass grafts would save less than 1 per cent of the annual costs of health care.

Further essays, all by leading academics and clinicians, cover topics as varied and as fascinating as modern approaches to cancer, the future of transplantation and the new genetics; there is even a brave discussion of where the next breakthroughs are likely to be. One interesting point, which again I think few people are aware of, is that the estimate of cancer deaths (USA) from diet is higher than those from smoking.

For the final few words, I would like